

## HEALTH & SCIENCE

# Flu vaccine plentiful, a change from the past

**Physicians say it's no longer necessary to prioritize who gets shots, and public health officials are talking about recommending them for everyone.**

By [Victoria Stagg Elliott](#), AMNews staff. Dec. 10, 2007.


Jill Braverman-Panza, MD, an internist in Albany, N.Y., doesn't expect that administering the flu vaccine is going to take the same financial bite out of her practice that it has in recent memory. For many seasons, her supply of approximately 1,200 shots tended to arrive in December, if at all. By then, most of her patients would have received shots from retail outlets and public health clinics -- something she encouraged to ensure they got immunized. But it often meant leftover vaccine and no way to get reimbursed.

"We had to throw out quite a few vials in the last few years," she said. "This year, we received adequate supplies early. There's been no problem."

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Many physicians across the country are finding this flu vaccine season far less aggravating than previous ones. Supplies are arriving and being given to as many patients as possible.

"Everything we ordered showed up on time. We're not having to ration the vaccine this year. It's a pleasant change," said George Voigtlander, MD, a family physician with Pawnee County Rural

Health in Pawnee City, Neb. He has received the 1,500 doses he expects to use.

According to the Centers for Disease Control and Prevention, the first cases of flu are appearing, and vaccine supplies are ample. As of Nov. 2, manufacturers had distributed 103 million doses. A total of 132 million may be distributed before the season is over. These numbers are far higher than in previous years.

"This is good news," said Jeanne Santoli, MD, deputy director of the CDC's Immunization Services Division. "Influenza vaccine appears to be more widely available than ever before. ... We are hopeful that this year a record number of people will get vaccinated."

Physicians and public health officials have been working for years to stabilize influenza vaccine supplies. The American Medical Association and the CDC organize the National Influenza Vaccine Summit annually to move toward this goal. Now that supplies are flowing more freely, attention is turning to how to take advantage of the opportunity that so much vaccine provides.

**The CDC  
estimates  
that 132**

## **doses of flu vaccine will be distributed by the end of the flu season.**

For instance, public health officials are increasingly talking about scrapping the long list of recommendations that covers nearly 75% of the population in favor of offering the vaccine to everyone. This notion is expected to come up at next February's meeting of the CDC's Advisory Committee on Immunization Practices when a vote may be held about whether to endorse the vaccine for all who are younger than 18, which is viewed as a step toward this goal.

Meanwhile, numerous state and local health departments are using supplies to test their plans to respond to pandemic flu or another type of crisis that would require immunizing large

numbers of people in a short time. In Arkansas, for three days in November, the state health department administered 99,379 shots at 81 drive-in and walk-up clinics throughout the state. In October, the Louisiana Dept. of Health and Hospitals immunized 25,995 at nine clinics over a 5½ hour period.

Efforts to promote increasing the vaccine's uptake, including using celebrities to focus attention on the push, also are ramping up. Such initiatives have been handled cautiously in the past because supplies were so unstable. Last month, though, the American Lung Assn. launched the second year of its "Faces of Influenza" campaign with Jennifer Garner, best known for her role in "Alias;" and Dean Cain, famous for playing Superman on "Lois and Clark: The New Adventures of Superman."

## **Health professionals targeted**

Medical organizations are renewing efforts to reach health care professionals. Only 34% of this group is vaccinated annually, an amount regarded as far too low. In order to address the continuing shortfall, the National Foundation for Infectious Diseases hosted a roundtable last month to discuss the challenges of improving these numbers. The organization also unveiled the GIVE -- Get Influenza Vaccine every year -- initiative ([www.nfid.org/give](http://www.nfid.org/give)). The program allows health care workers to create a personalized certificate pledging to receive an annual flu vaccine. In addition, educational messages designed to rebut myths about this immunization are posted.

"There's clearly enough vaccine for everyone to prevent influenza in themselves, their patients and their loved ones," said William Schaffner, MD, NFID vice president.

Vaccination of health workers is regarded as critical because several studies have documented that nosocomial transmission of the influenza virus lengthens hospital stays, increases health care costs and ups the risk of death. The virus may be shed before symptoms appear, but, even after they do, a health care professional often does not stay home. Also, a mild case in a healthy health care worker can translate to a deadly one in someone who is ill.

"This is a patient-safety issue. The immunization of health care workers will protect these vulnerable populations from influenza and its complications," said Litjen Tan, PhD, the American Medical Association's director of infectious diseases, immunology and molecular medicine, during a teleconference organized by NFID. The AMA, along with many other medical societies, supports maximizing immunization in this group.

Advocates for increasing vaccination among those employed in health care settings have long focused on educational efforts to achieve improvements, with limited success. Many are eager to see the impact of new standards on the subject from the Joint Commission. As of

Jan. 1, hospitals and long-term care facilities were required to offer on-site access to this immunization to all staffers and independent contractors. This season is the first full influenza season to be covered by the rule.

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## ADDITIONAL INFORMATION:

### Flu vaccine: It's all about timing

When influenza immunizations arrive is often as important as -- if not more important than -- how much will be available. Late supplies can throw vaccination efforts into chaos and leave physicians with leftover vaccine.

Here is a breakdown of vaccine deliveries over the past few years. All numbers are cumulative (in millions of doses).

	July	Aug.	Sept.	Oct.	Nov.	Dec	Jan.	Feb.
<b>1999-2000</b>	9.5	29.1	44.3	75.8	76.8	76.8	76.8	
<b>2000-2001</b>	2.0	7.4	16.6	26.6	48.2	70.4	70.4	
<b>2001-2002</b>	0.0	2.7	23.9	43.0	76.2	77.7	77.7	
<b>2002-2003</b>	0.0	14.5	50.7	82.7	83.0	83.0	83.0	
<b>2003-2004</b>	0.2	18.5	48.1	76.4	80.6	82.6	83.1	
<b>2004-2005</b>	0.0	8.5	17.7	42.6	52.1	56.4	57.0	57.1
<b>2005-2006</b>	0.0	6.4	28.2	59.1	80.1	80.9	81.2	
<b>2006-2007</b>			26.8	69.8	100.1	102.5	102.5	
<b>2007-2008</b>			56.3	100.7				

Note: For the past two seasons, the Centers for Disease Control and Prevention has changed how deliveries are tracked. For 2006-07 and 2007-08, numbers for July and August are not available but are included in the September totals. Approximately 132 million doses may be produced before the 2007-08 season ends. Source: Centers for Disease Control and Prevention

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### Geographic spread of this year's flu

As reported by state and territorial health epidemiologists, for the week ending Nov. 10:

**Local flu activity:** Florida, Hawaii and Louisiana.

**Sporadic activity:** Alaska, California, Colorado, Connecticut, Delaware, District of

Columbia, Idaho, Indiana, Kentucky, Massachusetts, Minnesota, Mississippi, Nevada, New Jersey, New York, Oklahoma, Oregon, Pennsylvania, South Dakota, Tennessee, Texas and Utah.

**No influenza activity:** Alabama, Arizona, Arkansas, Georgia, Illinois, Iowa, Kansas, Maine, Maryland, Michigan, Missouri, Montana, Nebraska, New Hampshire, New Mexico, North Carolina, North Dakota, Ohio, Rhode Island, South Carolina, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming.

Note: For the same week in 2006, a similar level of influenza activity had been reported. Two states had reported regional influenza activity; four reported local activity; 21 states and the District of Columbia had reported sporadic influenza activity; and 23 states reported none.

Source: Centers for Disease Control and Prevention

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